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**** CONTINUING DATA *******
 This application is a CON of 09/619,899 07/19/2000 ABN
 which is a CIP of 09/434,878 11/05/1999 PAT 6,552,024
 which claims benefit of 60/116,823 01/21/1999 *JL*

**** FOREIGN APPLICATIONS *******
none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 03/21/2002**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 6	TOTAL CLAIMS 52	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>Shih Chai</i> Initials				

ADDRESS
38552

TITLE
Compositions and methods for mucosal delivery

FILING FEE RECEIVED 1446	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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